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AO 239 (Rev. 12/13) Application to Proceed in District Court Without Prepaying Fees or Costs (Long Form)

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UNITED STATES DISTRICT COURT

for the

Terera Young alks	Western District of	Tennessee
Donella D. (pseudonyn) Plantiff/Petitioner v. Loyl. of the Treasury IRS Defendant/Respondent	steven T.) / Mnuchin, sa. (4)	Civil Action No.
	•	

APPLICATION TO PROCEED IN DISTRICT COURT WITHOUT PREPAYING FEES OR COSTS (Long Form)

Affidavit in Support of the Application

I am a plaintiff or petitioner in this case and declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief requested. I declare under penalty of perjury that the information below is true and understand that a false statement may result in a dismissal of my claims.

Signed:

Instructions

Complete all questions in this application and then sign it. Do not leave any blanks: if the answer to a question is "0," "none," or "not applicable (N/A)," write that response. If you need more space to answer a question or to explain your answer, attach a separate sheet of paper identified with your name, your case's docket number, and the question number.

Date: 11 94 ne 2019

1. For both you and your spouse estimate the average amount of money received from each of the following sources during the past 12 months. Adjust any amount that was received weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate. Use gross amounts, that is, amounts before any deductions for taxes or otherwise.

Income source	 Average monthly income amount during the past 12 months		Inco	nt expected onth		
	 You		Spouse	Y	ou	Spouse
Employment	\$ Ø	\$		\$	Ø	\$
Self-employment	\$ Ø	\$		\$	0	\$
Income from real property (such as rental income)	\$ 0	\$		\$	Ø	\$
Interest and dividends	\$ Ø	\$		\$	<i>a</i>	\$
Gifts	\$ Ø	\$		\$	6	\$
Alimony	\$ ø	\$		\$	Ø	\$
Child support	\$ Ø	\$		\$	Ø	\$

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Retirement (such as social security, pensions, annuities, insurance)	s - Ø	\$ s s
Disability (such as social security, insurance payments)	\$ - Ø	\$ s—Ø s —
Unemployment payments	$s-\phi$	\$ s (\$
Public-assistance (such as welfare)	s – Ø	\$ s — Ø s —
Other (specify):	\$	\$ s — 8 s —
Total monthly income:	s _ Ø	\$ s _ 6 s _

2. List your employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address	Dates of employment	Gross monthly pay
IR	5335 Getwell Road Memphis, TN	1800 2017 - March 2018	\$ 1400 +1-
pone	NA	MA	\$ MA

3. List your spouse's employment history for the past two years, most recent employer first. (Gross monthly pay is before taxes or other deductions.)

Employer	Address Dates of employment		Gross monthly pay
NIA			\$
			\$
			\$

Financial institution	Type of account	Amo	Amount you have		Amount your spouse has	
MA		\$	D	\$		
NIA		\$	D	\$		
NA		\$	Ó	\$		

If you are a prisoner, you must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

5.	List the assets, and their values,	which you own	or your spouse o	wns. Do not list	clothing and c	ordinary
	household furnishings.	•	•		8	,

Assets owned by you or your spouse				
Home (Value)	\$	<u></u>		
Other real estate (Value)	\$	_ -y _ Ø		
Motor vehicle #1 (Value)	\$	Ø		
Make and year:				
Model:				
Registration #:				
Motor vehicle #2 (Value)	\$	φ		
Make and year:				
Model:				
Registration #:				
Other assets (Value)	\$	Ø		
Other assets (Value)	\$	Ø		

6. State every person, business, or organization owing you or your spouse money, and the amount owed.

Person owing you or your spouse money	Amount owed to you	Amount owed to your spouse
MA	s Ø	s not married
NIA - O	s	s
NA	sØ	s

7. State the persons who rely on you or your spouse for support.

Name (or, if under 18, initials only)	Relationship	Age
WIA	MA	NA
/		

8. Estimate the average monthly expenses of you and your family. Show separately the amounts paid by your spouse. Adjust any payments that are made weekly, biweekly, quarterly, semiannually, or annually to show the monthly rate.

		You	Y	our spouse
Rent or home-mortgage payment (including lot rented for mobile home) Are real estate taxes included? Yes No Is property insurance included? Yes	s	650	\$	NoT
Utilities (electricity, heating fuel, water, sewer, and telephone)	\$	110	\$	Marild
Home maintenance (repairs and upkeep)	\$	15	\$	<i>→</i>
Food	\$	100	\$	a
Clothing	\$	10	\$	4
Laundry and dry-cleaning	\$	10	\$	9
Medical and dental expenses	\$	50	\$	9
Transportation (not including motor vehicle payments)	\$	120	\$	Þ
Recreation, entertainment, newspapers, magazines, etc.	\$	4	\$	5
Insurance (not deducted from wages or included in mortgage payments)				
Homeowner's or renter's:	\$	15	\$	0
Life:	\$	19	\$	0
Health:	\$	O	\$	0
Motor vehicle:	\$	15	\$	a
Other:	\$	50	\$	<i>\rightarrow</i>
Taxes (not deducted from wages or included in mortgage payments) (specify):	\$	0	\$	3
Installment payments				
Motor vehicle:	\$	-0	\$	0
Credit card (name):	\$	0	\$	a
Department store (name):	\$	\$	\$	5
Other:	\$	Ø	\$	
Alimony, maintenance, and support paid to others	\$	Ø	\$	

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